

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 13-OCT-2011		TIME 00:15:00	2. ADDRESS OF OCCURRENCE 111 N KEDZIE AVE CHICAGO, IL 60612				3. LOCATION CODE 277	4. BEAT/OCCUR 1331			
SUBJECT INFORMATION <input type="checkbox"/> DNA	5. POSITION 9171	6. LAST NAME RENTNER	7. FIRST NAME ROBERT J	8. STAR NO. 2052	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE 600	12. HT. 195			
	14. DATE OF APPT. 18-MAR-1996	15. EMPLOYEE NO. [REDACTED]	16. UNIT & BEAT OF ASSIGNMENT 315 6753	17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	18. MEMBER INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No					
	20. LAST NAME NEIL	21. FIRST NAME JERMEKA	22. M.I.	23. SEX <input type="checkbox"/> 01 M <input checked="" type="checkbox"/> 02 F	24. RACE BLK	25. D.O.B. [REDACTED]	26. HT. 506	27. WT. 220			
	28. ADDRESS [REDACTED]	29. TELEPHONE NO. [REDACTED]	30. WAS SUBJECT ARMED? OTHER (SPECIFY) <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	31. SUBJECT INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	32. SUBJECT ALLEGED INJURY? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]	34. BY WHOM? [REDACTED]	35. CONDITION <input checked="" type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized	36. APPARENTLY NORMAL [REDACTED]	37. 02 Under influence [REDACTED]						
	38. CHARGES PLACED ***** PLEASE SEE NEXT PAGE *****		39. DNA [REDACTED]	40. CB NO. 18257009	IR NO. [REDACTED]	DNA [REDACTED]					
	REASON FOR USE OF FORCE (Check all that apply) <input type="checkbox"/> DNA	41. SUBJECT ACTIONS DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		42. ASSAULTANT:ASSAULT FLED <input checked="" type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____		43. ASSAULTANT:BATTERY IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____		44. ASSAULTANT:DEADLY FORCE ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____			
		45. MEMBERS RESPONSE MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		46. OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) TASER (Contact Stun) TASER (Laser Targeted) TASER (Spark Displayed) OTHER _____		47. ELBOW STRIKE CLOSED HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) IMPACT MUNITION (Describe in Box 40) OTHER _____		48. FIREARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____			
		49. OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED]		50. ADDITIONAL INFORMATION							
		POSITION [REDACTED]		STAR NO. [REDACTED]	UNIT [REDACTED]						
51. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		52. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		53. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial		54. WEATHER CONDITIONS CLEAR					
55. TASER DART ID NO. [REDACTED]		56. WEAPON SERIAL NO. (Include Letters) [REDACTED]		57. CHICAGO GUN REG. NO. [REDACTED]		58. IL FIREARM OWNER ID. NO. [REDACTED]		59. HANDGUN CERTIFICATE NO. [REDACTED]			
60. SPECIAL WEAPON CERTIFICATE NO. [REDACTED]		61. PROPERTY INVENTORY NO. [REDACTED]		62. TYPE OF AMMUNITION USED SHOT SHELLS RELOADED		63. NO. OF WEAPONS DISCHARGED BY THIS MEMBER [REDACTED]		64. TOTAL NO. OF SHOTS MEMBER FIRED [REDACTED]			
65. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER		66. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		67. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST)		68. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO					
69. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) [REDACTED]		70. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 5 FT. <input type="checkbox"/> 02 5 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		71. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		72. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)					
73. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT.& W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT.& W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV.		74. SIGNATURE RENTNER, ROBERT J 13-OCT-2011 03:32:56									
Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.											
Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.											
75. REVIEWING SUPERVISOR (Print Name) SCHULTZ, NEAL A		STAR NO. 2652	SIGNATURE [REDACTED]	DATE REVIEWED 13-OCT-2011 03:36:00		TIME 13-OCT-2011 03:36:00		76. EVENT NO. 1128600168			

SUBJECT
INFORMATION

36. CHARGES PLACED

625 ILCS 5.0/11-204.1-A-3, 720 ILCS 5.0/12-3.05-D-4, 720 ILCS 5.0/12-3.05-D-4,
720 ILCS 570.0/401-A-7.5-C-I

DNA

WATCH COMMANDER/OVIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE AGS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

DNA

REFUSED

UNABLE TO INTERVIEW (Specify Reason)

On-going investigation by Area Detectives in pursuit of felony charges for Agg Batt to PO.

76. WATCH COMMANDER/OVIC RATIONALE FOR BOX 77 FINDING

During investigation by Officers into narcotic trafficking by offender, the offender attempted to flee from Officers and evade arrest by crashing a vehicle into the Officers vehicle, knowing that her arrest was imminent and that those approaching in a vehicle were Police Officers. The Officers sustained minor injury as did the offender. All of the actions by the Officers were taken in the furtherance of their investigation and their attempt to question the offender when the unprovoked violent attack on the Officers took place.

77. WATCH COMMANDER/OVIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO _____ OBTAINED _____

78. WATCH COMMANDER/OVIC (Print Name)

KARNICK, THOMAS E

SIGNATURE

DATE COMPLETED TIME

13-OCT-2011 03:44:05

79. DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:	<input type="checkbox"/> SUPPLEMENTARY REPORT	<input type="checkbox"/> I.O.D. REPORT	80. TOTAL TRR's THIS EVENT NO.
<input type="checkbox"/> CASE REPORT	<input checked="" type="checkbox"/> OFFICER BATTERY REPORT	<input type="checkbox"/> CR INITIATION REPORT	2
<input type="checkbox"/> ARREST REPORT	<input type="checkbox"/> TO-FROM SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)		